

GEORGIA DEPARTMENT OF AGRICULTURE
19 Martin Luther King, Jr. Drive, S.W., Atlanta, GA 30334

APPLICATION TO VOLUNTEER TO ASSIST PIKE CO HORSES
02/05/2007

PERSONAL DATA

PLEASE TYPE OR PRINT CLEARLY IN INK.

DAYTIME TELEPHONE #:	EVENING TELEPHONE #:	
LAST NAME:	FIRST NAME:	MIDDLE INITIAL:
ADDRESS:	APT. #:	
CITY/STATE:	ZIP CODE:	COUNTY:

GENDER (Check One):

- ☐ Female
☐ Male

I certify that I am 18 years of age or older:

- ☐ Yes
☐ No

SCHEDULE

- ☐ 8 am – 12 noon shift ☐ 1 pm – 5 pm shift
☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday

SKILLS (Check any which apply to you.)

- | | |
|---|--|
| <input type="checkbox"/> Horseback Riding – novice | <input type="checkbox"/> Equine Experience - novice |
| <input type="checkbox"/> Horseback Riding – skilled | <input type="checkbox"/> Equine Experience – skilled |
| <input type="checkbox"/> Horseback Riding - expert | <input type="checkbox"/> Equine Experience - expert |

Volunteers must be able to lift 50 pounds and be able to push a loaded wheelbarrow.

WORK HISTORY (If additional space is needed, please attach a separate sheet.)

CURRENT OR LAST EMPLOYER	ADDRESS	
DESCRIPTIVE JOB TITLE	FROM (Month/Year)	TO (Month/Year)
DETAIL OF DUTIES		

LICENSES AND CERTIFICATIONS

TYPE	SPECIALIZATION	CERTIFICATE NO.	EXPIRATION DATE
LICENSED ELECTRICIAN			
LICENSED PLUMBING			
OTHER LICENSE – GIVE PROFESSION OR ORGANIZATION			

REFERENCES

NAME	ADDRESS	BUSINESS/OCCUPATION	PHONE NUMBER

REFERRED BY (if applicable): _____

ADDRESS: _____

(Signature)

(Date)

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